

NOTICE OF ELECTION CANCELLATION

WHEREAS, the number of candidates for the position(s) on the _____ School Board of Trustees, District No. _____ is equal to the number of positions to be elected.

THEREFORE, the _____ School Trustees Election is hereby cancelled.

DATED this _____ day of _____, 20_____.

Print Chairperson's Name

Signature of Chairperson

Print District Clerk's Name

Signature of District Clerk

NOTE: Only the clerk's signature is required if the election is cancelled due to the number of candidates.